Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	rt 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
	your pictu exar	e the name that is on government-issued government-issued irre identification (for nple, your driver's ise or passport).	Autumn First name M Middle name		First name Middle name
	iden	g your picture tification to your ting with the trustee.	Castrey Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
		ide your married or den names.			
3.	you num Indi	the last 4 digits of r Social Security sber or federal vidual Taxpayer tification number	xxx-xx-4879		

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 2 of 54

Case number (if known)

Debtor 1 Autumn M Castrey

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	205 Stearn Dr	If Debtor 2 lives at a different address:			
		Genoa, IL 60135-4000 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		DeKalb				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 3 of 54

Debtor 1 Autumn M Castrey

Case number (if known)

art	Tell the Court About	Your I	Bankruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Banke box.	kruptcy	
	choosing to file under	■ Chapter 7						
			Chapter 11					
			Chapter 12					
			Chapter 13					
3.	How you will pay the fee		about how yo	pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details t how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money r. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with				
					Illments. If you choose this opti (Official Form 103A).	on, sign and attach the Application for Individuals	s to Pay	
			I request tha	at my fee be wai	ved (You may request this option	n only if you are filing for Chapter 7. By law, a jud	dge may,	
			applies to yo	juired to, waive yo ur family size and	our fee, and may do so only if yo I you are unable to pay the fee i	our income is less than 150% of the official pover in installments). If you choose this option, you mu	ty line that ist fill out	
						cial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ N	lo.					
	last 8 years?	ПΥ	es.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ N	lo					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ N	lo. Go to I	ine 12.				
	Toolaonoo .	ПΥ	es. Has yo	our landlord obtai	ned an eviction judgment agains	st you and do you want to stay in your residence	?	
				No. Go to line 1	2.			
				Yes. Fill out <i>Init</i> bankruptcy petit		Judgment Against You (Form 101A) and file it wi	ith this	

Document Page 4 of 54 Case number (if known) Debtor 1 Autumn M Castrey Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

Part 4:

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Autumn M Castrey

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 54 Case number (if known) Debtor 1 Autumn M Castrey Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do vou □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Autumn M Castrey Signature of Debtor 2 Autumn M Castrey Signature of Debtor 1

September 19, 2017 MM / DD / YYYY Executed on

MM / DD / YYYY

Executed on

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 7 of 54

Debtor 1 Autumn M Castrey

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jacob Maegli Signature of Attorney	for Debtor	Date	September 19, 2017 MM / DD / YYYY			
Jacob Maegli Printed name Eric Pratt Law Firm	P.C.					
Firm name 5301 E. State St, Ste 116 Rockford, IL 61108						
Number, Street, City, State & Contact phone 815-31		mail address	rockford@jordanpratt.com			
6317153 Bar number & State						

	00 17 02100	Docum		 Dood Main
Fill in this infor	mation to identify you	r case:		
Debtor 1	Autumn M Castre	,		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
Official Fo	orm 106Sum			

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file

		Your as	ssets
		Value o	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,300.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,300.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	5,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	15,826.00
	Your total liabilities	\$	20,826.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,590.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,575.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Entered 09/19/17 12:54:10 Desc Main Case 17-82189 Doc 1 Filed 09/19/17 Document

Page 9 of 54
Case number (if known) Debtor 1 Autumn M Castrey

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	١.
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	15

3,478.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 10 of 54 Fill in this information to identify your case and this filing: Debtor 1 Autumn M Castrey Middle Name Last Name First Name Debtor 2 Middle Name First Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Ford Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: **Taurus** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2012 Debtor 2 only Current value of the Current value of the 194000 entire property? Approximate mileage: Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$5,000.00 \$5,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$5,000.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Case 17-82189 Filed 09/19/17 Entered 09/19/17 12:54:10 Document Page 11 of 54 Debtor 1 Case number (if known) Autumn M Castrey Yes. Describe..... Older Household furniture & personal belongings \$1,500.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$300.00 Tv, Computers, Cell phones, and other electronic devices 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$200.00 Necessary wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... \$100.00 Various Costume Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,100.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Doc 1

Current value of the portion you own? Do not deduct secured

Desc Main

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 12 of 54 Case number (if known)

				claims or exempti	ions.
16	■ No	nave in your wallet, in your home	e, in a safe deposit box, and on hand	when you file your petition	
17	institutions. I		ts; certificates of deposit; shares in cr th the same institution, list each.	redit unions, brokerage houses, and other simila	ar
	□ No ■ Yes		Institution name:		
		17.1. Checking	Chase Bank	\$	200.00
18		or publicly traded stocks investment accounts with broke	rage firms, money market accounts		
	■ No □ Yes	Institution or issuer nar	ne:		
19	joint venture	ock and interests in incorpora	ted and unincorporated businesse	es, including an interest in an LLC, partnersh	ոip, and
	■ No □ Yes. Give specific info	ormation about them Name of entity:		% of ownership:	
20	Negotiable instruments i	include personal checks, cashie	ble and non-negotiable instrument ers' checks, promissory notes, and mo fer to someone by signing or delivering	oney orders.	
	☐ Yes. Give specific info	rmation about them Issuer name:			
21	. Retirement or pension Examples: Interests in If □ No		(b), thrift savings accounts, or other p	ension or profit-sharing plans	
	Yes. List each account	t separately. Type of account:	Institution name:		
		401(k)	Through Employer	Un	ıknown
22		d deposits you have made so the	at you may continue service or use frolic utilities (electric, gas, water), telec	om a company communications companies, or others	
	☐ Yes		Institution name or individual:		
23	Annuities (A contract for	r a periodic payment of money t	o you, either for life or for a number o	f years)	
	☐ Yes Iss	suer name and description.			
24	. Interests in an educatio 26 U.S.C. §§ 530(b)(1), 5 ■ No		ified ABLE program, or under a qu	alified state tuition program.	
	• • •	stitution name and description. S	Separately file the records of any inter	rests.11 U.S.C. § 521(c):	
25	■ No		er than anything listed in line 1), an	d rights or powers exercisable for your bene	efit
	U Voc. Civo appositio into	armatian about them			

Debtor 1

Document Page 13 of 54 Case number (if known) Debtor 1 Autumn M Castrey 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: \$0.00 **Employer Provided Term Life Policy** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached

Official Form 106A/B Schedule A/B: Property

for Part 4. Write that number here.....

Case 17-82189

Doc 1

Filed 09/19/17

Entered 09/19/17 12:54:10

Desc Main

page 4

\$200.00

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 14 of 54 Case number (if known) Debtor 1 Autumn M Castrey Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$5,000.00 57. Part 3: Total personal and household items, line 15 \$2,100.00 Part 4: Total financial assets, line 36 58. \$200.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$7,300.00 Copy personal property total \$7,300.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$7,300.00

Official Form 106A/B Schedule A/B: Property page 5

		Bodanie	1 440 10 010 1	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Autumn M Castrey	/		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.
Older Household furniture & personal belongings	\$1,500.00	■ \$1,500.00 735 ILCS 5/12-1001(b)
Line from <i>Schedule A/B</i> : 6.1		□ 100% of fair market value, up to any applicable statutory limit
Tv, Computers, Cell phones, and other electronic devices	\$300.00	\$300.00 735 ILCS 5/12-1001(b)
Line from <i>Schedule A/B</i> : 7.1		□ 100% of fair market value, up to any applicable statutory limit
Necessary wearing apparel	\$200.00	\$200.00 735 ILCS 5/12-1001(a)
		□ 100% of fair market value, up to any applicable statutory limit
Various Costume Jewelry Line from Schedule A/B: 12.1	\$100.00	\$100.00 735 ILCS 5/12-1001(b)
		□ 100% of fair market value, up to any applicable statutory limit
Checking: Chase Bank Line from Schedule A/B: 17.1	\$200.00	\$200.00 735 ILCS 5/12-1001(b)
Elite Helli Goriodale PVD. 17.1		100% of fair market value, up to any applicable statutory limit

Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Case 17-82189 Doc 1 Document Page 16 of 54 Debtor 1 Autumn M Castrey Case number (if known) Brief description of the property and line on Schedule A/B that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B 401(k): Through Employer 735 ILCS 5/12-1006 100% Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to

		any applicable statutory limit
3.	Are you claiming a homestead exemption of more than \$16 (Subject to adjustment on 4/01/19 and every 3 years after that the state of the	•
	■ No	
	Yes. Did you acquire the property covered by the exemption No	on within 1,215 days before you filed this case?
	☐ Yes	

Case 17-82	2189 Doc	1 Filed 09/1 Docume		d 09/19/17 12: 7 of 54	54:10 Desc N	Main
Fill in this information to ide	entify your case		1 400 1	01 0 -		
Debtor 1 Autumn	M Castrey					
First Name		Middle Name	Last Name		-	
Debtor 2 (Spouse if, filing) First Name		Middle Name	Last Name		-	
United States Bankruptcy Co	urt for the NC	ORTHERN DISTRICT	OF ILLINOIS			
ormod otatoo barmaptoy oo	110	ACCOUNT DISTRICT	0. 122.11010		-	
Case number					☐ Checl	c if this is an
in Milowity					-	ded filing
						J
Official Form 106D						
Schedule D: Cred	ditors Wh	o Have Clai	ms Secure	d by Propert	У	12/15
Be as complete and accurate as s needed, copy the Additional P number (if known).	age, fill it out, nur	mber the entries, and a				
. Do any creditors have claims			on a the annual beautiful and M	and become a distance land		
☐ No. Check this box and		1 to the court with you	ir other schedules. Y	ou have nothing else t	to report on this form.	
Yes. Fill in all of the inf	formation below.					
Part 1: List All Secured C	Claims					
2. List all secured claims. If a cr for each claim. If more than one of much as possible, list the claims i	creditor has a partic	cular claim, list the other	creditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Gresty Auto Sales	Descr	ibe the property that so	ecures the claim:	\$5,000.00	\$5,000.00	\$0.00
Creditor's Name	2012	Prord Taurus 1940	00 miles			
2080 Harlem Rd	As of apply.	the date you file, the cl	aim is: Check all that			
Loves Park, IL 61111		ontingent				
Number, Street, City, State & Zi	p Code Un	liquidated				
		sputed				
Who owes the debt? Check or	ne. Natur	e of lien. Check all that	apply.			
Debtor 1 only		agreement you made (s	such as mortgage or see	cured		
Debtor 2 only	ca	ar Ioan)				
Debtor 1 and Debtor 2 only		atutory lien (such as tax	,			
At least one of the debtors and		dgment lien from a lawsu	uit			
Check if this claim relates to community debt	oa 🗆 Otl	her (including a right to c	offset)			
Date debt was incurred		Last 4 digits of accou	nt number			
Add the dollar value of your e	entries in Column A	A on this page. Write th	nat number here:	\$5.00	00.00	
If this is the last page of your Write that number here:		. •			00.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

Fill in th	nis information to identify your	Document	Page 18 of 54	
Debtor 1	Autumn M Castre	y Middle Name	Last Name	
Debtor 2		Wilder Warrie	Last Name	
(Spouse if,		Middle Name	Last Name	
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LLINOIS	
Case nu (if known)	imber			Check if this is an
				amended filing
Officia	al Form 106E/F			
Sched	dule E/F: Creditors V	Vho Have Unsecured	l Claims	12/15
Schedule Schedule eft. Attac name and	G: Executory Contracts and Unex D: Creditors Who Have Claims Sent the Continuation Page to this pall case number (if known).	pired Leases (Official Form 106G). cured by Property. If more space is ge. If you have no information to re	list executory contracts on Schedule A/B: Property (Offic Do not include any creditors with partially secured claims s needed, copy the Part you need, fill it out, number the er eport in a Part, do not file that Part. On the top of any addi	s that are listed in stries in the boxes on the
Part 1:	List All of Your PRIORITY U			
1. Do a	ny creditors have priority unsecure	ed claims against you?		
■ N	lo. Go to Part 2.			
ΠY	es.			
Part 2:	List All of Your NONPRIORI	TY Unsecured Claims		
3. Do a	ny creditors have nonpriority unse	cured claims against you?		
□N	lo. You have nothing to report in this	part. Submit this form to the court with	n your other schedules.	
■ Y	'oc			
4. List a	all of your nonpriority unsecured c cured claim, list the creditor separate one creditor holds a particular claim,	ly for each claim. For each claim liste	the creditor who holds each claim. If a creditor has more that identify what type of claim it is. Do not list claims already in a have more than three nonpriority unsecured claims fill out the	cluded in Part 1. If more
				Total claim
4.1	advocate sherman hospital	Last 4 digits of ac	count number	\$250.00
	Nonpriority Creditor's Name 35134 Eagle Way Chicago, IL 60678	When was the deb	ot incurred?	-
	Number Street City State Zlp Code	As of the date you	ı file, the claim is: Check all that apply	
	Who incurred the debt? Check one			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	At least one of the debtors and ar	nother Type of NONPRIO	RITY unsecured claim:	
	☐ Check if this claim is for a com	П		
	debt Is the claim subject to offset?		ing out of a separation agreement or divorce that you did not aims	
	■ No	☐ Debts to pensio	n or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	medical	
				_

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 19 of 54

Debtor 1 Autumn M Castrey Case number (if know) 4.2 **AFNI** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name Box 3517 When was the debt incurred? Bloomington, IL 61702 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify NOTICE ☐ Yes 4.3 bankcard services \$100.00 Last 4 digits of account number Nonpriority Creditor's Name Box 4477 When was the debt incurred? Beaverton, OR 97076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Credit card purchases ☐ Yes Other. Specify 4.4 Capital One \$2,261.00 Last 4 digits of account number 9299 Nonpriority Creditor's Name Attn: Bankruptcy Opened 06/14 Last Active Po Box 30253 When was the debt incurred? 8/15/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 20 of 54

Debtor 1 Autumn M Castrey Case number (if know) 4.5 Capital One Last 4 digits of account number 5661 \$1.976.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/13 Last Active Po Box 30253 When was the debt incurred? 7/21/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.6 Cash Net USA Last 4 digits of account number \$1,000.00 Nonpriority Creditor's Name 200 W. Jackson Blvd 4th floor When was the debt incurred? Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes loan Other. Specify 4.7 Central Credit Services \$528.00 Last 4 digits of account number 5643 Nonpriority Creditor's Name 9550 Regency Square Blvd Ste 500 When was the debt incurred? Opened 3/02/17 Jacksonville, FL 32225 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Infinity Healthcare ☐ Yes

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 21 of 54

Case number (if know)

Debio	Autumin w Castrey	Case Humber (II know)	
4.8	Cepamerica	Last 4 digits of account number	\$50.00
	Nonpriority Creditor's Name Box 582663	When was the debt incurred?	
	Modesto, CA 95358 Number Street City State Zlp Code	As of the date you file the claim is. Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical	
4.9	Choice Recovery Inc	Last 4 digits of account number 7651	\$356.00
	Nonpriority Creditor's Name 1550 Old Henderson Rd Ste 100 Columus, OH 43220	When was the debt incurred? Opened 02/16	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Collection Attorney Affordable Dentistry Today Other. Specify Other. Specify	
4.1	Convergent Heathcare Recovery	Last 4 digits of account number 4869	\$50.00
	Nonpriority Creditor's Name 121 Ne Jefferson St Ste	When was the debt incurred? Opened 11/15	
	Peoria, IL 61602 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or and date you may me orannies or book an inac apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collection Attorney Cbo/Osf	
	□ res	Other. Specify Outlection Attorney Coo/OSI	

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 22 of 54

Debto	or 1 Autumn M Castrey		Case number (if know)	
4.1 1	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	8335	\$0.00
	Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 04/14 Last Active 7/29/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.1	Creditors Protection S	Last 4 digits of account number	2687	\$320.00
	Nonpriority Creditor's Name Po Box 4115 Rockford, IL 61101	When was the debt incurred?	Opened 12/10/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Rockford Ar	nesthesiologists	
4.1	Directv	Last 4 digits of account number		\$500.00
	Nonpriority Creditor's Name PO Box 5007	When was the debt incurred?		
	Carol Stream, IL 60197-5008 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Services		

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 23 of 54

Autumn M Castrey		Case number (if know)	
Fingerhut	Last 4 digits of account number	4737	\$392.00
Nonpriority Creditor's Name 6250 Ridgewood Rd	When was the debt incurred?	Opened 04/15 Last Active 12/05/16	
St Cloud, MN 56303 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	ount	
Frontier Communication Nonpriority Creditor's Name	Last 4 digits of account number	3155	\$274.00
19 John St Middletown, NY 10940	When was the debt incurred?	Opened 08/15	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Agriculture		
Genesis Bankcard Srvs	Last 4 digits of account number	8271	\$0.00
Nonpriority Creditor's Name			<u>.</u>
15220 Nw Greenbrier Pkwy Ste 200 Beaverton, OR 97006	When was the debt incurred?	Opened 5/09/16 Last Active 8/15/16	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other Specify Credit Card		
	- Outon Opcomy		

Document Page 24 of 54 Case number (if know) Debtor 1 Autumn M Castrey 4.1 \$0.00 H & R Accounts Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 672 Moline, IL 61266 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify notice ☐ Yes 4.1 4875 Harvard Collection \$582.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 01/17** 4839 N Elston Ave Chicago, IL 60630 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney II Department Of Human ■ Other. Specify Service ☐ Yes Horizon Fin 6806 \$362.00 Last 4 digits of account number Nonpriority Creditor's Name Attention: BSA & Fraud Department When was the debt incurred? Opened 4/28/16 Po Box 800 Michigan City, IN 46360 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

 \square Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Kishwaukee Hospital

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 25 of 54

Case number (if know)

Jebioi	Autumin ivi Castrey		Case Humber (II know)	
1.2	Oppity Fin	Last 4 digits of account number	2311	\$0.00
	Nonpriority Creditor's Name	_	Opened 12/16/15 Lept Active	
	11 E. Adams Chicago, IL 60603	When was the debt incurred?	Opened 12/16/15 Last Active 9/15/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Unsecured		
4.2	Oral & Maxillo Facial Surgeons	Last 4 digits of account number		\$245.00
	Nonpriority Creditor's Name 1675 Bethany Rd Suite A Sycamore, IL 60178	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other Specify medical		
4.2	Presence St. Joseph Hospital	Last 4 digits of account number		\$1,645.00
	Nonpriority Creditor's Name 32816 Collection Center Dr Chicago, IL 60693	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□ Yes	■ Other. Specify medical		
		- Outer, opening		

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 26 of 54

Case number (if know)

Autumn M Castrey	Case number (ii know)	
Ralph Grunwald	Last 4 digits of account number	\$1,000.00
Nonpriority Creditor's Name 3601 Broadway	When was the debt incurred?	
Rockford, IL 61108 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you divergent as priority claims	d not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify rent	
Receivables Performance Mgmt	Last 4 digits of account number 9443	\$484.00
Nonpriority Creditor's Name		
Attn: Bankruptcy	When was the debt incurred? Opened 09/16	
Po Box 1548 Lynnwood, WA 98036		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did report as priority claims 	d not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Collection Attorney Directv	
Rockford Mercantile	Last 4 digits of account number 7800	\$2,451.00
Nonpriority Creditor's Name 2502 S. Alpine Rd	When was the debt incurred? Opened 12/08/15	
Rockford, IL 61108 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the diam is. Oneon all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did report as priority claims	d not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Rockford Health System Rmh	

Debto	or 1 Autumn I	M Castrey	Document Page 2	27 of 5	54 number (if	know)		
4.2	0000							#0.00
6	SCCS Nonpriority Cre	oditor's Namo	Last 4 digits of account number			_		\$0.00
	914 14th S		When was the debt incurred?					
	Box 480							
	Modesto, C							
		t City State Zlp Code I the debt? Check one.	As of the date you file, the claim	Is: Chec	k all that ap	pply		
	■ Debtor 1 or							
		•	Contingent					
	Debtor 2 or	•	☐ Unliquidated					
	_	nd Debtor 2 only	Disputed	ad alaimı				
	_	e of the debtors and another	Type of NONPRIORITY unsecure Student loans	eu ciaim:				
	☐ Check if the debt	his claim is for a community	_				li-l 4	
		ubject to offset?	Obligations arising out of a sep report as priority claims	aration a	greement o	r divorce that you d	lid not	
	■ No	•	Debts to pension or profit-shar	ng plans,	and other s	similar debts		
	☐ Yes		■ Other. Specify notcie					
4.2	Silver Cloud	d Financial						\$1,000.00
7	Nonpriority Cre		Last 4 digits of account number			_		\$1,000.00
	635 East H		When was the debt incurred?					
		e, CA 95485	_	-				
		t City State Zlp Code	As of the date you file, the claim	is: Chec	k all that ap	pply		
	_	I the debt? Check one.						
	Debtor 1 or	•	Contingent					
	Debtor 2 or	-	Unliquidated					
	☐ Debtor 1 a	nd Debtor 2 only	Disputed					
		e of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
		his claim is for a community	☐ Student loans					
	debt Is the claim s	ubject to offset?	Obligations arising out of a sep report as priority claims	aration a	greement o	r divorce that you d	lid not	
	■ No		Debts to pension or profit-shari	ng plans,	and other s	similar debts		
	☐ Yes		Other. Specify loan					
Part 3	B: List Othe	rs to Be Notified About a Deb	ot That You Already Listed					
5. Use	this page only if	you have others to be notified a	bout your bankruptcy, for a debt that	you alrea	ady listed i	n Parts 1 or 2. For	r example, if a	collection agency
have	more than one		meone else, list the original creditor i t you listed in Parts 1 or 2, list the add r submit this page.					
Part 4	Add the A	Amounts for Each Type of Un	secured Claim					
			ms. This information is for statistical	reporting	n purposes	only. 28 U.S.C. §	159. Add the a	mounts for each
	of unsecured c				9 P P			
	6a	. Domestic support obligations		6a.	\$	Total Claim	0.00	
	Total	. Domestic support obligations		ou.	Ψ		0.00	
	claims	Tayon and cortain other delice	vou owo the government	6h	•		0.00	
HOIN	Part 1 6b 6c.		njury while you were intoxicated	6b. 6c.	\$		0.00	
	6d		ecured claims. Write that amount here.	6d.	\$ ——		0.00	
		, , , , ,						
	6e	. Total Priority. Add lines 6a thro	ough 6d.	6e.	\$		0.00	
		-			<u> </u>			
						Total Claim		
	6f.	Student loans		6f.	\$		0.00	

Official Form 106 E/F

Total claims

from Part 2

6g.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

0.00

0.00

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 28 of 54

Debtor 1	Autumn M	Castrey	Case n	umber (if know)		
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	15,826.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	15,826.00	

Official Form 106 E/F

Fill in this infor	rmation to identify your	case:		
Debtor 1	Autumn M Castrey	У		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
					_
	Number	Street			
	City		State	ZIP Code	_
2.2	City		State	ZIP Code	
2.2	Maria				_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	Number	Sileet			
	City		State	ZIP Code	_
2.4	Oity		Oldic	Zii Oode	
2.4	Name				_
	ivame				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	140111001	Ollect			
	City		State	ZIP Code	_
	Oity		Oldic	211 0000	

		Docume	ent Page 30 c	of 54	
Fill in this	s information to identify you	r case:			
Debtor 1	Autumn M Castre	ey			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	nber				
(if known)				Check if this is a	an
				amended filing	
Officia	I Form 106H				
	dule H: Your Co	dobtore			40/45
Scried	dule n. Toul Col	repror 2			12/15
	e and case number (if known you have any codebtors? (, , , , , ,		as a codebtor.	
■ No □ Ye					
	thin the last 8 years, have yona, California, Idaho, Louisian			y? (Community property states and territories includington, and Wisconsin.)	de
	. Go to line 3. s. Did your spouse, former sp	ouse, or legal equivalent liv	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	if your spouse is filing with you. List the person sure you have listed the creditor on Schedule D (6G). Use Schedule D, Schedule E/F, or Schedule	(Official
	Column 1: Your codebtor	ZID Codo		Column 2: The creditor to whom you owe th	ne debt
	Name, Number, Street, City, State and	ZIF Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
				Cabadula D. Kas	
3.2	Name			_ □ Schedule D, line □ □ Schedule E/F, line	
				☐ Schedule G, line	
	Normal and Co. 1				
	Number Street City	State	ZIP Code		

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 31 of 54

Fill	in this information to identify your o	ase:								
Del	btor 1 Autumn M C	astrey								
	btor 2 puse, if filing)				_					
Uni	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number 		-			☐ A supp	ended filing plement sho	g owing postpetition he following date:		
O	fficial Form 106I						DD/ YYYY	no renorming date.		
	chedule I: Your Inc	ome				IVIIVI / L	וווו /טכ		12/1	
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not fili or spouse is not filing w	ng jointly, and your sith you, do not inclu	spouse i	s liv nati	ing with you, on about you	include in r spouse. I	formation about f more space is	your needed,	
1.	Fill in your employment information.		Debtor 1			Dek	otor 2 or no	n-filing spouse		
	If you have more than one job, attach a separate page with	Employment status	■ Employed	■ Employed				☐ Employed		
	information about additional employers.		☐ Not employed				☐ Not employed			
		Occupation	branch manager							
	Include part-time, seasonal, or self-employed work.	Employer's name	World Finance							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here? <u>1 1/2 ye</u>	ears						
E sti spoi	imate monthly income as of the duse unless you are separated.	ate you file this form. If	,				·	·	J	
	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the informatio	n for all e	empl	oyers for that p	oerson on th	ne lines below. If	you need	
						For Debtor		Debtor 2 or n-filing spouse		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,360	.00 \$_	N/A		
3.	Estimate and list monthly over	time pay.		3.	+\$	0	.00_ +\$	N/A		
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	3,360.00	5 \$	N/A		

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 32 of 54

Deb	tor 1	Autumn M Castrey	-	(Case n	umber (<i>if ki</i>	nown)				
						Debtor 1		nor	Debtor n-filing s	pouse	
	Cop	y line 4 here	4.		\$	3,360	0.00	\$_		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	684	1.00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$	(0.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$		0.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$		0.00	\$_		N/A	_
	5e.	Insurance	5e		\$		00.6	*_		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f.		\$		0.00	\$_ \$		N/A N/A	_
	5y. 5h.	Other deductions. Specify:	5g 5h). 1.+	\$ 		0.00	—		N/A	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$ 			\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		Ψ — \$	2,590	0.00	. Ψ_ \$		N/A	_
			٠.		Ψ	2,090	7.00	Ψ_		IN/A	_
8.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a	ì.	\$	(0.00	\$_		N/A	_
	8b.	Interest and dividends	8b).	\$	(0.00	\$_		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	8c	: .	\$	(0.00	\$		N/A	
	8d.	Unemployment compensation	8d	i.	\$	(0.00	\$		N/A	
	8e.	Social Security	8e	€.	\$	(0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$,		\$		N/A	
	8g.	Pension or retirement income	— 8g		\$ 		0.00	•		N/A N/A	_
	8h.	Other monthly income. Specify:). 1.+	\$		0.00			N/A	_
			_	г				· —		,,,	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	(0.00	\$_		N//	4
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2	,590.00	+ \$		N/A	= \$	2,590.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,					,
11.	1. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .									0.00	
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies							e. 12.	\$	2,590.00
4.5	_		•							Combi month	ned ly income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								
	П	Yes, Explain:									

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 33 of 54

Fills	n this informa	ition to identify y	our case:			ĺ				
Debt		Autumn M Ca				Check	c if this is:			
1	ebtor 2						☐ An amended filing☐ A supplement showing postpetition chapter			
` '	ouse, if filing)					_	<u> </u>	the following date:		
Unite	ed States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	IOIS	N	/IM / DD / YYYY			
	e number nown)									
		rm 106J								
Be a info nun	as complete a rmation. If m nber (if know	ore space is ne n). Answer eve	s possible eded, atta ry questio	If two married people a ch another sheet to this						
Part 1.	Is this a joir	ribe Your House nt case?	enoia							
	□N	es Debtor 2 live	•	ate household? al Form 106J-2, <i>Expense</i> s	s for Sanarata House	ahold of Debts	or 2			
2.		e dependents?	_	ai i 01111 1000-2, <i>Experise</i> .	s for Separate Flouse	eriola di Debio	Л 2.			
۷.	Do not list Do Debtor 2.	•	□ No ■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?		
	Do not state dependents				Son		16	□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No		
3.	expenses of	penses include f people other t d your depende	han 🗖	No Yes				☐ Yes		
Esti exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a sup						
the		h assistance an		government assistance luded it on <i>Schedule I:</i>			Your exp	enses		
4.		or home owners		ses for your residence.	Include first mortgag	e 4. \$		700.00		
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a. \$		0.00		
	•	rty, homeowner'				4b. \$		10.00		
		maintenance, re owner's associa		ipkeep expenses		4c. \$ 4d. \$		0.00		
5.				oominium dues our residence, such as ho	ome equity loans	4a. \$ 5. \$		0.00		

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 34 of 54

Debtor 1	Autumn M Castrey	Case num	ber (if known)	
1 14:11	ties:			
6. Utili 6a.	Electricity, heat, natural gas	6a.	\$	150.00
6b.	Water, sewer, garbage collection	6b.	·	50.00
			·	
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		250.00
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	7.	·	500.00
	dcare and children's education costs	8.	\$	50.00
Clot	hing, laundry, and dry cleaning	9.	\$	25.00
). Pers	sonal care products and services	10.	\$	50.00
. Med	lical and dental expenses	11.	\$	100.00
≥. Traı	nsportation. Include gas, maintenance, bus or train fare.		_	450.00
	not include car payments.	12.		150.00
3. Ent e	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
. Cha	ritable contributions and religious donations	14.	\$	0.00
. Insu	irance.			
Do r	not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	200.00
	Other insurance. Specify:	15d.		0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		·	0.00
Spe		16.	\$	0.00
	allment or lease payments:		•	0.00
	Car payments for Vehicle 1	17a.	\$	340.00
	Car payments for Vehicle 2	17b.		0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.		
	· · ·	17d.	Ф	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). er payments you make to support others who do not live with you.	10.	\$	0.00
		19.	Ψ	0.00
Spe	er real property expenses not included in lines 4 or 5 of this form or on <i>Sche</i>		our Incomo	
	 Mortgages on other property 	20a.		0.00
			·	
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
20e.	Homeowner's association or condominium dues	20e.		0.00
. Oth	er: Specify:	21.	+\$	0.00
0-1				
	culate your monthly expenses		•	0.575.00
	Add lines 4 through 21.		\$	2,575.00
226.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,575.00
0-1	sulate very manthly not income			
	culate your monthly net income.	00-	r.	0 =00 0=
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,590.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,575.00
00	O blood was a subbasing of the subsection of the			
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	15.00
	The result is your monthly net income.	۷٥٥.		10.00
4 Do	you expect an increase or decrease in your expenses within the year offer yo	u filo this	form?	
	you expect an increase or decrease in your expenses within the year after yo example, do you expect to finish paying for your car loan within the year or do you expect your			se or decrease because of c
	fication to the terms of your mortgage?	mortgage	payment to increas	o or uccrease because of a
■ N	, 5 5			
	es. Explain here:			

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 35 of 54

Fill in thi	ia information to identify your				
	is information to identify your	case.			
Debtor 1	Autumn M Castre	·	Last Name		
Dobtor 2		Middle Name	Last Name		
Debtor 2 (Spouse if, f		Middle Name	Last Name		
		NODTHEDN DIGTORS	T 05		
United St	tates Bankruptcy Court for the:	NORTHERN DISTRIC	I OF ILLINOIS		
Case nur	mber				
(if known)				☐ Cho	eck if this is an
				am	ended filing
O((,	I E 400D				
	l Form 106Dec				
Decla	aration About a	an Individua	l Debtor's Sc	hedules	12/15
	rried people are filing togethe				
	money or property by fraud in both. 18 U.S.C. §§ 152, 1341,		kruptcy case can result ii	n fines up to \$250,000, or imprisor	nment for up to 20
	3				
Did	you pay or agree to pay some	eone who is NOT an atto	rney to help you fill out b	ankruptcy forms?	
	No				
П	Yes. Name of person			Attach Bankruptcy Petition	n Preparer's Notice.
				Declaration, and Signature	
Unde	er penalty of perjury, I declare	that I have read the sun	nmary and schedules filed	d with this declaration and	
	they are true and correct.		•		
Y	/c/ Autumn M Castroy		Х		
_	/s/ Autumn M Castrey Autumn M Castrey		Signature of	Debtor 2	
	Signature of Debtor 1		Oignature of t		
	Date September 19, 2017		Date		

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 36 of 54

Fill	in this inform	nation to identify you	r case:			
Deb		Autumn M Castre				
200		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT O	OF ILLINOIS		
(if kno	e number own)				-	Check if this is an mended filing
Sta		of Financial	Affairs for Individ			4/10
infor	mation. If m		attach a separate sheet to		equally responsible for sup	
Part	1: Give D	Details About Your Ma	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	☐ Married■ Not mai	rried				
2.	During the l	ast 3 vears, have you	lived anywhere other than	where you live now?		
	_	, , , ,				
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out Sci	hedule H: Your Codebtors (Of	ficial Form 106H).		
Part	2 Explai	in the Sources of You	r Income			
	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$26,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main

Page 37 of 54 Case number (if known) Document Debtor 1 Autumn M Castrey

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.		s income e deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last calen nuary 1 to	dar year: December :	31, 2016)	■ Wages, commissions, bonuses, tips		\$37,625.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
		dar year bef December 3		■ Wages, commissions, bonuses, tips		\$30,000.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
	and other winnings. List each s	public benef If you are fili	it payments; ng a joint cas ne gross inco	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	est; divid ou recei	ends; money colle ved together, list it	cted from lawsuits; only once under De	royalties; an ebtor 1.	
				Dobtor 1			Dobtor 2		
				Debtor 1 Sources of income Describe below.	each	s income from source e deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Pai	rt 3: List	Certain Pa	ments You	Made Before You Filed for I	Bankrup	tcy			
6.	□ No.	Neither De individual puring the No. Yes	btor 1 nor E rimarily for a 90 days befor Go to line 7 List below 6 paid that crinot include o adjustment r Debtor 2 o 90 days befor Go to line 7 List below 6	each creditor to whom you paideditor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years or both have primarily consume you filed for bankruptcy, dieseach creditor to whom you paideditor.	d you pay d a total of the safter the	e." y any creditor a tot of \$6,425* or more mestic support obli uptcy case. at for cases filed or ts. y any creditor a tot of \$600 or more ar	al of \$6,425* or mo in one or more pay gations, such as ch or after the date of al of \$600 or more?	re? /ments and the control of adjustment of adjustment of the control of the con	the total amount you and alimony. Also, do t.
				ments for domestic support of this bankruptcy case.	bligations	s, such as child sup	pport and alimony.	Also, do not	include payments to an
	Creditor'	s Name and	Address	Dates of payme	nt	Total amount paid	Amount you still owe	Was this p	payment for

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document

Page 38 of 54
Case number (if known) Debtor 1 Autumn M Castrey

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	No Yes. List all payments to an insider.					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of novment	Total amount	Amount you	Bosson for	this payment
	insider 5 Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
	rt 4: Identify Legal Actions, Repossession					
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cases, small claims action:	s, divorces, collectic	on suits, paternity a	ctions, suppor	t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below. ■ No. Go to line 11. □ Yes. Fill in the information below.	v.	erty repossessed, 1		hed, attache	
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			p. spensy
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment become No Yes. Fill in the details.	ause you owed a debt?				
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12. Pa i	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 					
		tan allal menerales	a sudala e de de l	af many discharge	0	•
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gift:	s with a total value	of more than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main

Del	btor 1 Autumn M Castrey	Document	Page 39 of 54 Case number	er (if known)	
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		gifts or contributions with a to	otal value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		you contributed	Dates you contributed	Value
Par	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling?	tcy or since you filed f	or bankruptcy, did you lose ar	nything because of thef	t, fire, other disaster
	how the loss occurred	nclude the amount that i	e coverage for the loss insurance has paid. List pending 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or production and attorneys, bankruptcy petition produced any attorneys. Person Who Was Paid Address Person Who Made the Payment, if Not You Eric Pratt Law Firm P.C. 5301 E. State St, Ste 116	peparing a bankruptcy eparers, or credit counse Description an transferred	petition? eling agencies for services requi		Amount of payment \$1,485.00
17.	Rockford, IL 61108 rockford@jordanpratt.com Within 1 year before you filed for bankrup promised to help you deal with your credi	tors or to make payme		y or transfer any proper	ty to anyone who
	■ No ■ Yes. Fill in the details.		duality of any manager.	Data was was at	A
	Person Who Was Paid Address	transferred	d value of any property	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrul transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have already	business or financial a	affairs? as the granting of a security inter		

☐ Yes. Fill in the details.

Person Who Received Transfer Address Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Entered 09/19/17 12:54:10 Desc Main Case 17-82189 Doc 1 Filed 09/19/17 Page 40 of 54 Case number (if known) Document

Debtor 1 Autumn M Castrey

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No								
	☐ Yes. Fill in the details.								
	Name of trust		Description and v	alue of the pro	perty trans	ferred	Date Trans	sfer was	
Pa	rt 8: List of Certain Financial A	ccounts, Instru	uments, Safe Deposi	t Boxes, and St	orage Unit	s			
20.	sold, moved, or transferred? Include checking, savings, mon- houses, pension funds, coopera	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution ar Address (Number, Street, City, State ar Code)		ast 4 digits of ccount number	Type of accoinstrument	unt or	Date account was closed, sold, moved, or transferred	before cl	balance osing or transfer	
21.	Do you now have, or did you have cash, or other valuables?	ve within 1 yea	ır before you filed for	bankruptcy, a	ny safe dep	oosit box or other depo	sitory for sec	urities,	
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State an	nd ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)		Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe	Describe the contents		still	
Pa	rt 9: Identify Property You Hold	l or Control for	Someone Else						
23.	Do you hold or control any prop for someone.	erty that some	one else owns? Incl	ude any proper	ty you bori	rowed from, are storing	j for, or hold ii	n trust	
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State an	nd ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value	
	rt 10: Give Details About Environ								
	Environmental law means any fe toxic substances, wastes, or ma regulations controlling the clear	terial into the	air, land, soil, surface	e water, ground				dous or	
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Case 17-82189 Page 41 of 54 Case number (if known) Document

Debtor 1 Autumn M Castrey

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any r	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or administ	trative proceeding under any envi	ronmental law? Include settlements a	nd orders.			
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or Conn	ections to Any Business					
27.	Within 4 years before you filed for bankruptcy, di	id you own a business or have an	y of the following connections to any	business?			
	☐ A sole proprietor or self-employed in a tra	ade, profession, or other activity,	either full-time or part-time				
	☐ A member of a limited liability company (LLC) or limited liability partnershi	p (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing executiv	ve of a corporation					
	☐ An owner of at least 5% of the voting or e	equity securities of a corporation					
	■ No. None of the above applies. Go to Part 1:	2.					
	lacksquare Yes. Check all that apply above and fill in the	e details below for each business					
	Business Name Des Address	cribe the nature of the business	Employer Identification number Do not include Social Security r				
		ne of accountant or bookkeeper	Dates business existed				
28.	Within 2 years before you filed for bankruptcy, di institutions, creditors, or other parties.	id you give a financial statement t		de all financial			
	■ No						
	☐ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	e Issued					

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document

Page 42 of 54
Case number (if known) Debtor 1 Autumn M Castrey

Part 12: Si	gn Below		
are true and with a bankr	correct. I understand that maki	•	nd I declare under penalty of perjury that the answers or obtaining money or property by fraud in connection 0 years, or both.
/s/ Autumn	M Castrey		
Autumn M	Castrey	Signature of Debtor 2	
Signature of	f Debtor 1		
Date Sept	ember 19, 2017	Date	
Did you attac	ch additional pages to Your Sta	tement of Financial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you pay	or agree to pay someone who i	s not an attorney to help you fill out bankr	uptcy forms?
■ No			
☐ Yes. Name	e of Person Attach the Ba	ankruptcy Petition Preparer's Notice, Declarat	ion, and Signature (Official Form 119).

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 43 of 54

Fill in this inform	nation to identify your	case:				
Debtor 1	Autumn M Castrey					
	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
	nkruptcy Court for the:	NORTHERN DIST		INOIS		
Officed States Bar	ikruptcy Court for the.	NORTHERN DIS	I KICT OF ILL	INOIS		
Case number						Charle if this is an
(II KIIOWII)						☐ Check if this is an amended filing
				Filing Under Ch	apter 7	12/15
_	claims secured by yo	-				
you have lease You must file this	ed personal property a s form with the court w ver is earlier, unless th	nd the lease has n ithin 30 days after	you file you	r bankruptcy petition or by the use. You must also send copic		
	ople are filing together d date the form.	in a joint case, bo	th are equal	y responsible for supplying co	orrect informa	tion. Both debtors must
	and accurate as possib our name and case nur		s needed, att	ach a separate sheet to this fo	rm. On the to	p of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims				
1. For any credito	ors that you listed in Pa	rt 1 of Schedule D	: Creditors V	Vho Have Claims Secured by F	Property (Office	cial Form 106D), fill in the
information be Identify the cre	low. editor and the property the	nat is collateral	What do y secures a	ou intend to do with the prope debt?		Did you claim the property as exempt on Schedule C?
Creditor's G	resty Auto Sales			der the property.		□ No
name.				the property and redeem it. the property and enter into a		■ Yes
Description of	2012 Ford Taurus 1	94000 miles		mation Agreement.		
property securing debt:			☐ Retain t	the property and [explain]:		
Part 2: List Yo	our Unexpired Persona	Property Leases				
For any unexpire in the information	d personal property lean below. Do not list rea	ase that you listed I estate leases. Un	expired leas	G: Executory Contracts and U es are leases that are still in et oes not assume it. 11 U.S.C. §	ffect; the leas	
Describe your un	nexpired personal prop	perty leases			Will	the lease be assumed?
Lessor's name:						lo.
Description of lea	sed					10
Property:					□ Y	´es
Lessor's name:						lo
Description of lea	sed					
Property:					□ Y	'es
Lessor's name:						lo

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 44 of 54

Deb	tor 1	Autumn M Castrey	Case number (if know	vn)			
	criptior perty:	n of leased					
1 10	berty.			☐ Yes			
	sor's na			□ No			
		n of leased					
FIU	perty:			☐ Yes			
Les	sor's na	ame:		□ No			
		n of leased		<u>_</u>			
Prop	perty:			☐ Yes			
	sor's na			□ No			
		n of leased		_			
Pio	perty:			☐ Yes			
	sor's na			□ No			
		n of leased		<u>_</u>			
Pio	perty:			☐ Yes			
Part	3:	Sign Below					
Unde	er pena	alty of perjury, I declare that I have indicate	d my intention about any property of my estate that	secures a debt and any personal			
		nat is subject to an unexpired lease.	, , , , ,	••			
Х	/s/ Au	utumn M Castrey	X				
	Autu	mn M Castrey	Signature of Debtor 2				
	Signa	ture of Debtor 1					
	Date	September 19, 2017	Date				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankru

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 49 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	e Autumn M Castrey		Case No.	
	•	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENS	SATION OF ATTOR	NEY FOR DI	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,485.00
	Prior to the filing of this statement I have received			1,485.00
	Balance Due		\$	0.00
2.	\$_335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compen	sation with any other person u	inless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
6.	In return for the above-disclosed fee, I have agreed to reno	ler legal service for all aspects	of the bankruptcy of	ease, including:
	a. [Other provisions as needed] see attached fee agreement			
7.	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any discharge adversary proceeding or any Inquiries into the	geability actions, judicial lier		of from stay actions or any other
		CERTIFICATION		
	I certify that the foregoing is a complete statement of any abankruptcy proceeding.	agreement or arrangement for p	payment to me for r	epresentation of the debtor(s) in
	September 19, 2017	/s/ Jacob Maegli		
_	Date	Jacob Maegli 6317		
		Signature of Attorney Eric Pratt Law Firm		
		5301 E. State St, S		
		Rockford, IL 61108	04 <i>E</i> E46 E042	
		815-315-0683 Fax rockford@jordanpra		
		Name of law firm		

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 50 of 54

CHAPTER 7 FLAT FEE AGREEMENT Eric Pratt Law Firm, P.C. ("Attorney"), is engaged to represent
("Client"), in a Chapter 7 Bankruptcy. Attorney and Client agree that this representation includes the Petition, Statements and Schedules, Representation at the 341(a) meeting, This agreement does NOT include representation in court appearances, including but not limited to, dischargability complaints, Lien Avoidance, Motion to dismiss filed by US Trustee, inquiries into the value of assets, or any other hearing, contested motions, or adversary proceeding. Additional
fees will be required if these services are needed.
Client agrees to pay Attorney a flat fee of \$ 1485
Client understands that bankruptcy laws only allow for protection of certain amount of property and if any property remains unprotected, Client understands the Chapter 7 Trustee can sell it if Client does not or cannot buy out the Trustee's interest and that the US Trustee may object to the filing of a Chapter 7 if they believe Client has excess income and should be filing a Chapter 13.
Certain debts are not dischargeable under the bankruptcy laws, such as, student loans or educational debts, some taxes, undisclosed debts, debt related to family court matters (support/maintenance), fines, debts incurred by fraud, debts incurred after filling, future association/condo HOA dues, or any other debt found non-dischargeable by the Judge.
Client agrees not to transfer any property or incur any debt without expressed permission from Attorney or the Court. Client agrees to make full disclosure of all income, expenses, debts, and assets at the initial consultation and on the bankruptcy petition.
Client understands bankruptcy law requires the completion of a pre-filing and a post-filing course. Client agrees to pay for both the pre-filing and post-filing course independently of this agreement and working with Attorney to make sure that the certificates are received. If Client's case is closed without discharge by the Bankruptcy Court due to failure to complete post-filing course, Client shall be required to pay fees and cost related to the reopening of the case.
Attorney-Client relationship terminates and the attorney's file will be closed upon receipt of discharge of bankruptcy unless otherwise specified on this document. In the event Client terminates or cancels this Agreement prior to the filing of the bankruptcy Attorney shall deduct the amount of \$300 prior to refunding. Attorney shall promptly refund any amount in excess of \$300. Client authorizes Attorney to transfer any funds held in the trust account to the operating account at the time of such termination to ensure the amounts due and owing to either party can be properly assessed. Any and all physical records will be maintained in accordance with the laws governing such records and will be destroyed no later than 7 years after the file's closure.
By signing this agreement, I agree that I have had an opportunity to discuss the agreement with Attorney, understand the agreement, and have had an opportunity to ask questions and have received an explanation for any questions that I had.
CLIENT / ERIC PRATILAW FIRM, P.C.
Aut Canton Stant
Total: 1508 +335=1843
If payment via debit card, payments are as follows: \$200 fr. 930 The 15th and on the
If payment via debit card, payments are as follows: \$200 ft; 930 Total: 1500 t335-1843 If payment via debit card, payments are as follows: \$200 ft; 930 Then, \$200 on The 15 th and en The 15 the reafter and will be automatic via debit card on file with no prior authorization necessary. The \$335.00 cannot be debited from the card and shall be paid via check or cash prior to filing.
If payment via cash or check, payments are as follows: \$today. Then, \$
to be mailed in or dropped off at the office. The \$335.00 filing too shall be paid prior to filing

Case 17-82189 Doc 1 Filed 09/19/17 Entered 09/19/17 12:54:10 Desc Main Document Page 51 of 54

United States Bankruptcy CourtNorthern District of Illinois

		Not that it District of Initiols		
In re	Autumn M Castrey		Case No.	
		Debtor(s)	Chapter	7
	VI	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Number of Creditors:	
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.			
Date:	September 19, 2017	/s/ Autumn M Castrey Autumn M Castrey Signature of Debtor		

advocate sherman hospital 35134 Eagle Way Chicago, IL 60678

AFNI Box 3517 Bloomington, IL 61702

bankcard services Box 4477 Beaverton, OR 97076

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Capital One Attn: Bankruptcy Po Box 30253 Salt Lake City, UT 84130

Cash Net USA 200 W. Jackson Blvd 4th floor Chicago, IL 60606

Central Credit Services 9550 Regency Square Blvd Ste 500 Jacksonville, FL 32225

Cepamerica Box 582663 Modesto, CA 95358

Choice Recovery Inc 1550 Old Henderson Rd Ste 100 Columus, OH 43220

Convergent Heathcare Recovery 121 Ne Jefferson St Ste Peoria, IL 61602

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193 Creditors Protection S Po Box 4115 Rockford, IL 61101

Directv PO Box 5007 Carol Stream, IL 60197-5008

Fingerhut 6250 Ridgewood Rd St Cloud, MN 56303

Frontier Communication 19 John St Middletown, NY 10940

Genesis Bankcard Srvs 15220 Nw Greenbrier Pkwy Ste 200 Beaverton, OR 97006

Gresty Auto Sales 2080 Harlem Rd Loves Park, IL 61111

H & R Accounts P.O. Box 672 Moline, IL 61266

Harvard Collection Attn: Bankruptcy 4839 N Elston Ave Chicago, IL 60630

Horizon Fin Attention: BSA & Fraud Department Po Box 800 Michigan City, IN 46360

Oppity Fin 11 E. Adams Chicago, IL 60603

Oral & Maxillo Facial Surgeons 1675 Bethany Rd Suite A Sycamore, IL 60178 Presence St. Joseph Hospital 32816 Collection Center Dr Chicago, IL 60693

Ralph Grunwald 3601 Broadway Rockford, IL 61108

Receivables Performance Mgmt Attn: Bankruptcy Po Box 1548 Lynnwood, WA 98036

Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108

SCCS 914 14th St Box 480 Modesto, CA 95353

Silver Cloud Financial 635 East Hwy 20 C Upper Lake, CA 95485